

FORM PTO-1390 (REV 10-2003)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTORNEY'S DOCKET NUMBER	
<b>TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371</b>				WAS0676PUSA	
				U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5) <b>10/522125</b>	
INTERNATIONAL APPLICATION NO. PCT/EP2003/007789		INTERNATIONAL FILING DATE 17 July 2003 (17.07.2003)		PRIORITY DATE CLAIMED 25 July 2002 (25.07.2002)	
TITLE OF INVENTION <b>POLYVINYL ALCOHOLS AND POLYVINYL ACETALS CONTAINING SILANE</b>					
APPLICANT(S) FOR DO/EO/US Andreas Bacher et al.					
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:					
1. <input checked="" type="checkbox"/>	This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.				
2. <input type="checkbox"/>	This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing under 35 U.S.C. 371.				
3. <input type="checkbox"/>	This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.				
4. <input checked="" type="checkbox"/>	The US has been elected (Article 31).				
5. <input checked="" type="checkbox"/>	A copy of the International Application as filed (35 U.S.C. 371(c)(2))				
	a. <input type="checkbox"/>	is attached hereto (required only if not communicated by the International Bureau).			
	b. <input checked="" type="checkbox"/>	has been communicated by the International Bureau.			
	c. <input type="checkbox"/>	is not required, as the application was filed in the United States Receiving Office (RO/US).			
6. <input checked="" type="checkbox"/>	An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).				
	a. <input checked="" type="checkbox"/>	is attached hereto.			
	b. <input type="checkbox"/>	has been previously submitted under 35 U.S.C. 154(d)(4).			
7. <input type="checkbox"/>	Amendments to the claims of the International Application Under PCT Article 19 (35 U.S.C. 371(c)(3))				
	a. <input type="checkbox"/>	are attached hereto (required only if not communicated by the International Bureau).			
	b. <input type="checkbox"/>	have been communicated by the International Bureau.			
	c. <input type="checkbox"/>	have not been made; however, the time limit for making such amendments has NOT expired.			
	d. <input type="checkbox"/>	have not been made and will not be made.			
8. <input type="checkbox"/>	An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).				
9. <input checked="" type="checkbox"/>	An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).				
10. <input type="checkbox"/>	An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).				
Items 11 to 20 below concern document(s) or information included:					
11. <input checked="" type="checkbox"/>	An Information Disclosure Statement under 37 CFR 1.97 and 1.98.				
12. <input checked="" type="checkbox"/>	An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. This invention is assigned to Wacker Polymer Systems GmbH & Co. KG, of Johannes-Hess Str. 24, 84489 Burghausen, Germany. The Applicant requests that the assignee information be published with the application.				
13. <input checked="" type="checkbox"/>	A preliminary amendment.				
14. <input type="checkbox"/>	An Application Data Sheet under 37 CFR 1.76.				
15. <input type="checkbox"/>	A substitute specification.				
16. <input type="checkbox"/>	A power of attorney and/or change of address letter.				
17. <input type="checkbox"/>	A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.				
18. <input type="checkbox"/>	A second copy of the published international application under 35 U.S.C. 154(d)(4).				
19. <input type="checkbox"/>	A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).				
20. <input checked="" type="checkbox"/>	Other items or information: Postcard				

"Express Mail" Mailing Label No.: EV 499 751 216 US

Date of Deposit: January 24, 2005

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" under 37 C.F.R. 1.10 on the date indicated above and is addressed to: Mail Stop PCT, Commissioner for Patents, U.S. Patent & Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Denise R. Greig  
Denise R. Greig

U.S. APPLICATION NO. (If known) 37 C.F.R. 101/522125	INTERNATIONAL APPLICATION NO. PCT/EP2003/007789	ATTORNEY'S DOCKET NUMBER WAS0676PUSA																																																										
<p>21. The following fees are submitted:</p> <p><b>BASIC NATIONAL FEE (37 CFR 1.492(a)(1)-(5)):</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td style="width: 80%;">a) Basic national fee . . . . .</td> <td style="width: 10%; text-align: right;">\$300.00</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>b) Examination fee . . . . .</td> <td style="text-align: right;">\$200.00</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>c) Search fee . . . . .</td> <td style="text-align: right;">\$500.00</td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>TOTAL OF ABOVE CALCULATIONS =</b></td> <td style="text-align: right;"><b>\$1,000.00</b></td> </tr> </table> <p>Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Total Sheets</th> <th style="width: 25%;">Extra Sheets</th> <th style="width: 50%;">Number of each additional 50 or fraction thereof (round up to a whole number)</th> <th style="width: 10%; text-align: center;">RATE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">34 - 100 =</td> <td style="text-align: center; vertical-align: bottom;">/ 50 =</td> <td></td> <td style="text-align: right;">X \$250.00</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">\$ 00.00</td> </tr> </tbody> </table> <p>Surcharge of <b>\$130.00</b> for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">CLAIMS</th> <th style="width: 25%;">NUMBER FILED</th> <th style="width: 25%;">NUMBER EXTRA</th> <th style="width: 10%; text-align: center;">RATE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Total claims</td> <td style="text-align: center;">14 - 20 =</td> <td style="text-align: center;">0</td> <td style="text-align: right;">X \$50.00</td> </tr> <tr> <td style="text-align: center;">Independent claims</td> <td style="text-align: center;">3 - 3 =</td> <td style="text-align: center;">0</td> <td style="text-align: right;">X \$200.00</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>MULTIPLE DEPENDENT CLAIM(S) (if applicable)</b></td> <td style="text-align: right;">\$ 00.00</td> </tr> <tr> <td colspan="3" style="text-align: right;"><b>TOTAL OF ABOVE CALCULATIONS =</b></td> <td style="text-align: right;"><b>\$ 1,000.00</b></td> </tr> </tbody> </table> <p>Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%;"></td> <td style="width: 25%; text-align: right;"><b>SUBTOTAL =</b></td> <td style="text-align: right;"><b>\$ 1,000.00</b></td> </tr> </table> <p>Processing fee of <b>\$130.00</b> for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%;"></td> <td style="width: 25%; text-align: right;"><b>TOTAL NATIONAL FEE =</b></td> <td style="text-align: right;"><b>\$ 1,000.00</b></td> </tr> </table> <p>Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%;"></td> <td style="width: 25%; text-align: right;">+ \$ 40.00</td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>TOTAL FEES ENCLOSED =</b></td> </tr> </table> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%;"></td> <td style="width: 25%; text-align: right;"><b>Amount to be refunded:</b></td> </tr> <tr> <td colspan="2" style="text-align: right;"><b>Amount to be charged:</b> \$ 1,040.00</td> </tr> </table>			<input checked="" type="checkbox"/>	a) Basic national fee . . . . .	\$300.00	<input checked="" type="checkbox"/>	b) Examination fee . . . . .	\$200.00	<input checked="" type="checkbox"/>	c) Search fee . . . . .	\$500.00	<b>TOTAL OF ABOVE CALCULATIONS =</b>		<b>\$1,000.00</b>	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE	34 - 100 =	/ 50 =		X \$250.00				\$ 00.00	CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total claims	14 - 20 =	0	X \$50.00	Independent claims	3 - 3 =	0	X \$200.00	<b>MULTIPLE DEPENDENT CLAIM(S) (if applicable)</b>			\$ 00.00	<b>TOTAL OF ABOVE CALCULATIONS =</b>			<b>\$ 1,000.00</b>		<b>SUBTOTAL =</b>	<b>\$ 1,000.00</b>		<b>TOTAL NATIONAL FEE =</b>	<b>\$ 1,000.00</b>		+ \$ 40.00	<b>TOTAL FEES ENCLOSED =</b>			<b>Amount to be refunded:</b>	<b>Amount to be charged:</b> \$ 1,040.00	
<input checked="" type="checkbox"/>	a) Basic national fee . . . . .	\$300.00																																																										
<input checked="" type="checkbox"/>	b) Examination fee . . . . .	\$200.00																																																										
<input checked="" type="checkbox"/>	c) Search fee . . . . .	\$500.00																																																										
<b>TOTAL OF ABOVE CALCULATIONS =</b>		<b>\$1,000.00</b>																																																										
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE																																																									
34 - 100 =	/ 50 =		X \$250.00																																																									
			\$ 00.00																																																									
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE																																																									
Total claims	14 - 20 =	0	X \$50.00																																																									
Independent claims	3 - 3 =	0	X \$200.00																																																									
<b>MULTIPLE DEPENDENT CLAIM(S) (if applicable)</b>			\$ 00.00																																																									
<b>TOTAL OF ABOVE CALCULATIONS =</b>			<b>\$ 1,000.00</b>																																																									
	<b>SUBTOTAL =</b>	<b>\$ 1,000.00</b>																																																										
	<b>TOTAL NATIONAL FEE =</b>	<b>\$ 1,000.00</b>																																																										
	+ \$ 40.00																																																											
<b>TOTAL FEES ENCLOSED =</b>																																																												
	<b>Amount to be refunded:</b>																																																											
<b>Amount to be charged:</b> \$ 1,040.00																																																												
<p>a. <input checked="" type="checkbox"/> A check in the amount of <u>\$ 1,040.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>02-3978</u> in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-3978</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a charge card. <b>WARNING:</b> Information on this form may become public. <b>Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.</p>																																																												
<p>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p> <p>SEND ALL CORRESPONDENCE TO:</p> <p><b>CUSTOMER NO.</b> <b>22045</b></p> <p>Signature: </p> <p>Name: <u>William G. Conger</u></p> <p>Registration No.: <u>31,209</u></p>																																																												